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Bib Data Sheet

CONFIRMATION NO. 8536

<b>SERIAL NUMBER</b> 09/869,678	<b>FILING DATE</b> 07/02/2001 <b>RULE</b>	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> 2615	<b>ATTORNEY DOCKET NO.</b> PHN17,745	
<b>APPLICANTS</b> Erik Christian Schijlander, Eindhoven, NETHERLANDS;  <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/EP00/11114 11/09/2000  <b>** FOREIGN APPLICATIONS *****</b> GERMANY 99203754.9 11/10/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 11	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> Philips Electronics North America Corporation 580 White Plains Road Tarrytown, NY 10591 #24737					
<b>TITLE</b> Record carrier, device for playing back a record carrier, method for playing back a record carrier, device for recording a record carrier and method for recording a record carrier					
<b>FILING FEE RECEIVED</b> 1100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

DO/E0 BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 869678	RECEIPT DATE:	07 / 02 / 01
IA NUMBER:	PCT/ EP00 / 11114	IA FILING DATE:	11 / 09 / 00
FAMILY NAME:	SCHIJLANDER	DELAY WAIVED (Y/N):	<input checked="" type="checkbox"/> N
GIVEN NAME:	ERIK CHRISTIAN	DEMAND RECEIVED (Y/N):	<input checked="" type="checkbox"/> N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	10 / 11 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	PHN 17.745	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:		CUSTOMER NUMBER:	000000 TELEPHONE 0000000000
			FAX

NAME: MICHAEL E MARION  
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 STREET: 580 WHITE PLAINS ROAD

CITY: TARRYTOWN  
 STATE/COUNTRY: NY ZIP: 10591  
 EMAIL:

APPLICATION TITLES:

RECORD CARRIER, DEVICE FOR PLAYING A RECORD CARRIER, METHOD FOR PLAYIN  
 G BACK A RECORD CARRIER, DEVICE FOR RECORDING A RECORD CARRIER AND MET  
 HOD FOR RECORDING A RECORD CARRIER

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